

## Supplemental Application Data Sheet

### Application Information

<u>Application Number::</u>	<u>10/561,915</u>
<u>Filing Date::</u>	<u>December 22, 2005</u>
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	VERTEBRAL OSTEOSYNTHESIS EQUIPMENT
Attorney Docket Number::	0573-1025
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant One Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-LUC  
Middle Name::  
Family Name:: CLEMENT  
Name Suffix::  
City of Residence:: LA COLLE SUR LOUP  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 230 CHEMIN DE MONTFORT  
  
City of Mailing Address:: LA COLLE SUR LOUP  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06480

Applicant Two Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: VINCENT  
Middle Name::  
Family Name:: FIERE  
Name Suffix::  
City of Residence:: LYON  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 50 BOULEVARD DES BELGES  
  
City of Mailing Address:: LYON  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69006

Applicant Three Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN  
Middle Name::  
Family Name:: TAYLOR  
Name Suffix::  
City of Residence:: CANNES  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: VILLA PORALTO  
25 AVENUE DE PORALTO  
City of Mailing Address:: CANNES  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06400

Applicant Four Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: YVES  
Middle Name::  
Family Name:: ADAM  
Name Suffix::  
City of Residence:: AUTHIE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 4 ROUTE DE SAINT LOUET  
City of Mailing Address:: AUTHIE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-14280

Applicant Five Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BERNARD  
Middle Name::  
Family Name:: VILLARET  
Name Suffix::  
City of Residence:: CROIX-CHAPEAU  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 20 RUE DE SALLES  
City of Mailing Address:: CROIX-CHAPEAU  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-17220

**Correspondence Information**

Correspondence Customer Number::	00466
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**Representative Information**

Representative Customer Number::	00466
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**Domestic Priority Information**

This application	National Stage of	PCT/IB2004/002395	6/24/04
PCT/IB2004/002395	An application claiming the benefit under 35 USC 119(e)	60/490,516	7/29/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03/07779	6/27/03	Yes

**Assignment Information**

Assignee Name::	<u>MEDICREA TECHNOLOGIES</u>
Street of Mailing Address::	<u>Z.I. CHEF DE BALE</u>
City of Mailing Address::	<u>LA ROCHELLE</u>
State or Province of Mailing Address::	
Country of Mailing Address::	<u>FRANCE</u>
Postal or Zip Code of Mailing Address::	<u>F-17000</u>